## MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)

SERIAL NO.

10/590002

FILING DATE

APPLICANT(S)

## **CLAIMS**

	AS FILED		AFTER 14 AMENDMENT		AFTER 2 nd AMENDMENT	
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TOTAL CLAIMS	0		11		0	11

PTO - 1360 (REV. 04/2007)

	AS FILED		AFTER 1"AMENDMENT		AFTER 2 **AMENDMENT	
	IND.	DEP.	IND.	DEP.	IND.	DEP.
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TOTAL IND.	0	•	10	•	0	4
TOTAL DEP.	0	<b>←</b>	22		0 🗲	
TOTAL CLAIMS	0	144 to 144 to	32		0	

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